

# LETTERS TO THE EDITOR

## Down with "op. cit."

I note with interest that the *Journal of the Medical Library Association* (JMLA) uses a particular style of referencing for the articles that it publishes. Every reference in an article receives a fresh number each time it is mentioned in the text. This means that if authors refer to the *same* references somewhat further on in their papers then those references are given new, *different* numbers. The Latin abbreviation "ibid." appears in the reference list if the authors are referring to the same paper they have just cited or "op. cit." if they are referring the reader back to an earlier citation. This procedure may not matter much for the reader when references are few. It can matter a lot, however, when authors refer to the same references several times.

At least two difficulties arise with lengthy reference lists presented in this style. First of all the list gets much longer than it needs to be. For example, in an article I submitted to the JMLA [1], providing each reference with a fresh number increased the number of references from 46 to 102.

Second, the procedure is complicated for the readers. For example, a reader interested in a particular reference has to go first from the number given in the text (say 27) to that number in the list and, then, if this reference has been cited earlier, to search back up the non-alphabetical list for the name(s) of the author(s) of this particular article (e.g., perhaps now number 3). Furthermore, when there are several citations to different papers written by the same authors, every subsequent "op. cit." reference has to be further clarified by supplying the title of the particular paper being referred to—a tacit admission that the system is inadequate.

In my view, any reference system used in journal articles should be designed to help the reader find the information needed [2]. The system currently in use the JMLA fails in this respect.

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2. HARTLEY J. On choosing the typographic settings for reference lists. *Soc Stud Sci* 2002; 32(5/6):917–32.

## Editor's reply

Professor Hartley will be pleased to hear that the JMLA Editorial Board, at their annual meeting in Washington, DC, in May 2004, approved a change in policy for handling references. Beginning with the January 2005 issue, references will continue to be numbered sequentially in the order in which they first appear, but, if a particular citation is referred to again, the original number will be reused. We are grateful to Professor Hartley for encouraging us to consider this.

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## Emphasis on the need for guidelines for documentation of search strategy and results was needed, criticism of a Cochrane review was not

I was confused when reading Weller's comment and opinion piece [1] in the April 2004 *Journal of the Medical Library Association* (JMLA), responding to the article by Patrick et al. [2]. Why did Weller publish a piece devoted to criticizing the documented search strategy of a Cochrane review, [3] when Patrick's article was about how documentation of search strategies and their results has been inadequate and guidelines are needed to effectively analyze a review critically?

Weller's final paragraph is also confusing:

The findings of the JMLA researchers and the Cochrane example convincingly illustrate the need for librarians to be on any team that sets out to undertake meta-analyses or Cochrane reviews. Not only does the literature search strategy need to be reproducible, documentation should be provided that a comprehensive search was done, as pointed out by the JMLA authors. Had this been done with the peer review study, it might have drawn a different conclusion.

What does "this" refer to? Documentation? Mere *documentation* of a search strategy would not make any difference to the conclusion.

Does "this" refer to a librarian on the review team? Whether a librarian is on the team, alone, does not ensure a comprehensive search strategy or a well-documented one. In this case, a librarian was on the team, and, contrary to what Weller concludes, the search strategy was comprehensive and covered many permutations of peer and review and so on [4]. Lack of documentation is true in many other Cochrane reviews, because searches are long and decisions are often made to *not* document. An excellent example is the Cochrane Protocol for Pharmaceutical policies [5]: the four-page search strategy\* is not documented in the protocol. Guidelines and a balance in documentation are warranted.

Does "this" refer to a better search strategy? Weller criticizes the search strategy in the article, but her points are still confusing. For example, Weller says that the "Cochrane authors did not provide criteria for database selection or for the years searched, and not all databases were searched fully." She criticizes the review, because she believes that more years should have been searched in Current Contents. Was it necessary for the authors to document that the reason Current Contents was searched from 1999 to 2000 was because it was effectively used to top-up oth-

\*The Cochrane Protocol for Pharmaceutical policies may be viewed at <http://www.epoc.uottawa.ca/reviews.htm>.

er very large database search results to capture recent articles not yet indexed? Or was it necessary to indicate that Biological Abstracts was not searched, because, as a pure science database, it would likely not include relevant references? Documentation guidelines are needed.

By focusing on criticizing the specific search strategy of a Cochrane review, Weller has missed the valuable points made by Patrick et al.: to document and to provide guidelines and requirements for reporting search strategies and results in order that reviews and meta-analysis can be critically evaluated.

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2. PATRICK TB, DEMIRIS G, FOLK LC, MOXLEY DE, MITCHELL JA, TAO D. Evidence-based retrieval in evidence-based medicine. *J Med Libr Assoc* 2004 Apr;92(2):196-9.

3. JEFFERSON TO, ALDERSON P, DAVIDOFF F, WAGER E. Editorial peer-review for improving the quality of reports of biomedical studies (Cochrane methodology review). In: *The Cochrane Library*(1). Chichester, UK: John Wiley & Sons, 2004.

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## Weller responds

The Cochrane study [1] of editorial peer review concluded after a "comprehensive" search of the literature that identified twenty-one studies meeting their criteria that: "the practice of peer review is based on faith in its effects, rather than on facts." I pointed out shortcomings of the literature review and suggested additional search terms and additional sources of information that would provide a more comprehensive search [2]. I also suggested that librarians be part of each Cochrane team.

Santesso rightly states that "mere documentation of a search strategy would not make any difference to the conclusion." But the documentation should include information on all the sources searched, search terms, and years searched in each database. Each database should be searched for the

most current years available (this was not done in the Cochrane study). A thorough, timely literature search might have uncovered more relevant studies of editorial peer review, and those studies could alter the Cochrane conclusions.

I suggest that the Cochrane group update the literature review with the assistance of a librarian who would broaden the literature search to include terms related to peer review (anonymity, blind review, statistical review, etc.), to include published comprehensive monographs on editorial peer review, and to search all relevant databases. If new studies are found, they could easily be incorporated into an updated Cochrane review.

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